

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation Working America		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C90011156</div>		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 815 16th St NW				
(c) City, State and ZIP Code Washington DC 20006				
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Individual filers only <table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 60%;">Name of Employer</td> <td style="border: none; width: 40%;">Occupation</td> </tr> </table>			Name of Employer	Occupation
Name of Employer	Occupation			

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y

0 9 / 1 7 / 2 0 1 0

THROUGH

M M / D D / Y Y Y Y

0 9 / 1 7 / 2 0 1 0

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

1096.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM**SIGNATURE****DATE**

Jeff Prior

09/20/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 10991212126
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Stuart Arviso

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
501 1/2 Aspen Ave NE

Amount

62.83

City State Zip Code
Albuquerque NM 87102

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 188.49

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Lesley Bell

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
4805 Burton Ave SE

Amount

62.83

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 691.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Elizabeth Bennett

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
122 Stanford Dr SE

Amount

62.83

City State Zip Code
Albuquerque NM 87106

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 628.30

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

188.49

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991212127
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Karla Castaneda

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Mailing Address
7509 Dixon Rd SE

Amount

62.83

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 691.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Thomas Cruz

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Mailing Address
3208 Corona Dr NW

Amount

62.83

City State Zip Code
Albuquerque NM 87120

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 565.47

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Vivian Doak

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Mailing Address
515 Shirk Lane SW

Amount

62.83

City State Zip Code
Albuquerque NM 87105

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: _____
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 439.81

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

188.49

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

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SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Carolyn Guenther

Date

/ /

Mailing Address
8700 2nd St NW Space 4

Amount

62.83

City State Zip Code
Albuquerque NM 87114

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 691.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Deliria Jaramillo

Date

/ /

Mailing Address
9000 Trumbull St SE Apt. 26

Amount

88.26

City State Zip Code
Albuquerque NM 87123

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 882.60

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Shannon Laliberte Parks

Date

/ /

Mailing Address
328 Jefferson SE Apt. A

Amount

88.26

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 970.86

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

239.35

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991212129
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
James Mathews

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
6712 Tierra Dr NW

Amount

City State Zip Code
Albuquerque NM 87107

62.83

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NE
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 691.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Carlton McBurrows

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
6121 Matamoras Rd

Amount

City State Zip Code
Albuquerque NM 87144

62.83

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 125.66

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Papa John's Pizza

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
5800 Gibson Blvd SE

Amount

City State Zip Code
Albuquerque NM 87108

32.71

Purpose of Expenditure
Food

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 32.71

Disbursement For: ☐ Primary ☒ General
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

158.37

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991212130
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Cassandra Payan

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
1028 Pampas PI SE

Amount

109.09

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 1199.99

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Frank Powell

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
516 Alvarado Dr SE

Amount

62.83

City State Zip Code
Albuquerque NM 87108

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 691.13

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Alexander Sparrow

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
1595 5th St SE

Amount

62.83

City State Zip Code
Albuquerque NM 87124

Purpose of Expenditure
Salary and benefits

Category/
Type

Office Sought: ☒ House State: NM
House ☐ Senate District: 01
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICH

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 314.15

Disbursement For: ☐ Primary ☒ General
2010
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

234.75

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)

Working America

Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address

3400 University Blvd SE Suite T

Amount

28.85

City

Albuquerque

State

NM

Zip Code

87106

Purpose of Expenditure

Car rental

Category/
Type

Office Sought:

☒ House

State: NM

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICHCalendar Year-To-Date Per Election
for Office Sought

1357.10

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address

3400 University Blvd SE Suite T

Amount

28.85

City

Albuquerque

State

NM

Zip Code

87106

Purpose of Expenditure

Car rental

Category/
Type

Office Sought:

☒ House

State: NM

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICHCalendar Year-To-Date Per Election
for Office Sought

1385.95

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)Full Name (Last, First, Middle Initial) of Payee
Thrifty

Date

M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address

3400 University Blvd SE Suite T

Amount

28.85

City

Albuquerque

State

NM

Zip Code

87106

Purpose of Expenditure

Car rental

Category/
Type

Office Sought:

☒ House

State: NM

House

☐ Senate☐ President

District: 01

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
MARTIN HEINRICHCalendar Year-To-Date Per Election
for Office Sought

1414.80

Disbursement For:
2010☐ Primary☒ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

86.55

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

1096.00